



U.S. SENATOR TIM JOHNSON ANSWERS FREQUENTLY ASKED HEALTH CARE QUESTIONS

From the start of the health care reform debate, South Dakotans across our state have shared their experiences and thoughts regarding what works and what doesn't within our current health care system. Amid the discussion, however, there has been a great deal of misinformation that has caused many to become fearful of change. It is essential that South Dakotans have all the facts. To help the discussion about health care reform move forward in a constructive manner, I've compiled a list of answers to commonly-asked questions. I hope you will find it informative.

Q: The United States has the best health care in the world. Why do we need to reform?

A: We have the best health care in the world - if you can afford it. The economic signals are clear that our health care system is on an unsustainable course: an ever-growing share of family incomes are consumed by monthly health insurance premiums and out-of-pocket deductibles, the number of individuals carrying medical debt grows, and employers are finding it increasingly difficult to offer health care benefits to their workers. More and more Americans are foregoing important treatments and preventive efforts because they can no longer afford it. The costs of inaction to our nation's health are beyond measure.

Unfortunately, an increasing number of individuals and families are underinsured. This term refers to people with health insurance who find out - at the worst possible time - that their policies may not provide adequate benefits when they need them most. Health reform must happen now to address the threats of rising health care costs to our economy and to ensure that people who worked hard and played by the rules aren't suddenly bankrupted by medical bills.

Q: I like the coverage I have now. How will I benefit from health care reform?

A: Reform efforts will build upon the strengths of our health care system while fixing the parts that prevent so many from accessing affordable, quality health care. Health care reform will ensure that you and your family will have the secure and meaningful health care coverage you deserve. You'll be able to keep your coverage even if you change jobs or get sick, and your insurance company will no longer be able to deny coverage of necessary treatments due to a pre-existing condition. In addition, the premiums you pay will no longer contain a hidden cost of treating the uninsured.

Q: What is the difference between a public insurance option and a government takeover of health care?

A: Socialized medicine, such as the health care systems in Canada and Great Britain, means that the government pays for and administers care for everyone. That is very different from the public option being discussed in the United States.

A public option would simply be a government insurance plan that people could choose if they liked it better than the private insurance plans available to them. Americans who are not offered insurance through their employer or cannot afford private insurance plans need an affordable option. This public option would exist side-by-side with the health insurance plans offered by private insurance companies. People could choose the public option, or they could choose a private plan that best suits their needs.

Q: With our economy struggling, how can we afford health care reform?

A: Reform will undoubtedly be costly - but it is even more costly to do nothing. Frankly, we cannot afford to wait. Every day that goes by, 14,000 people lose their health insurance, and medical care isn't getting cheaper for anyone. In 30 years, one third of our nation's wealth will be spent on health care.

We need to find a way to reverse the cycle of health care costs that are spiraling out of control, and that effort must go hand-in-hand with covering all Americans. We can no longer afford to have uninsured people show up at the emergency room with conditions that could have been prevented by a visit to their doctor. We all pay for that, and it drives our costs ever higher. Preventative care, healthy choices, and a responsible health care reform package must drive our health care reform efforts. Frankly, the health of our economy and our nation depends on it.

Q: In an effort to cut costs, will the government begin rationing health care?

A: No, but we can cut costs by making smart choices about what works and avoiding unnecessary and ineffective treatments. Under our current system, for example, most doctors and hospitals are paid more for each test they run and for the number of times they see patients, rather than whether or not the patient gets better. The payments we make to providers have surprisingly little to do with patient outcomes. By paying better for good patient outcomes, we encourage providers to share test results with one another instead of repeating tests unnecessarily. We can also encourage providers to keep track of which treatments are effective and which are not, to share that information with their peers, and encourage the patient's providers to function as a team, coordinating information about the patient's progress, rather than simply shuffling the patient back and forth without follow-up. These kinds of reforms can shift our focus back to what's really important: getting the patient healthy, and helping them stay that way. Another important tenet of the health reform effort is to ensure that no one - not an insurance company and certainly not the government - prevents you from choosing the doctor you trust or receiving the most appropriate and effective treatment.

Q: Medicare offers stable, affordable coverage to millions of Americans 65 and over. How will reform affect this program?

A: Health reform efforts will strengthen Medicare. Reform will improve care for Medicare beneficiaries while reining in spiraling health costs that threaten the long-term stability of the program. From preventive care to prescription drug costs to hospice care, reform will improve the quality and affordability of services throughout the continuum of care. Cutting out waste and inefficiencies will help generate savings that can reduce Medicare premiums and ensure the program's security and stability for years to come.

Recently, outrageous accusations have claimed that health reform will "kill seniors" and that panels will decide who is healthy enough to merit care. There is no truth to these claims. Unfortunately, scare tactics such as these only mislead the public and prevent a constructive discussion of the issues. These scare tactics should not distract us from making meaningful improvements to Medicare and the health care delivery system as a whole.

